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identified. ASSIST Centers include Bettendorf, Burlington, Cedar Rapids, Council Bluffs, Creston, Decorah, Denison, Des Moines, Dubuque, Fort Dodge, Marshalltown, Mason City, Ottumwa, Sioux City, Spencer, and Waterloo.

Final negotiations have been completed with the National Science Foundation for enlarged support for the Academic Year Institute centered at the University of Iowa. The number of supervisor-interns will increase from ten to sixteen with a person identified in each region with released time for ASSIST involvement. A preliminary goal will be to identify community leaders, teachers, and interested students for future efforts. Preliminary assessment is planned for the 1972-73 academic year. This effort will be supported by the University of Iowa, cooperating school districts, and existing grants when assessment funds have been provided. The 1973-74 effort will focus on a statewide formalized needs assessment with several new instructional program models in trial stages.

Hopefully, Project ASSIST will be a major force in educational improvement in Iowa. More involvement of community, industrial, and school groups is needed. Unless national funding changes radically during the next year, additional direct support from the National Science Foundation can be expected. At the same time, much is possible from within Iowa where people and resources are used in such a cooperative venture. That's what Project ASSIST is all about!

UNIVERSITY OF WISCONSIN NEWS

A fetus with a genetic disorder can now be detected in time for the mother to decide whether or not she wants to bear the child, claims Dr. Gloria Sarto of the University of Wisconsin-Madison.

Speaking at a University of Wisconsin conference on "The Fetus and Newborn in High Risk Pregnancy," Dr. Sarto said that by studying fluids obtained from the amnion, the sac in which a fetus is immersed, doctors can now determine a number of genetic disorders.

After an amniotic fluid sample is obtained, the cells are cultured in the laboratory. A diagnosis, however, may take up to six weeks.

"The best time to obtain an amniotic fluid sample is around the 14th week of pregnancy," Dr. Sarto said. This allows ample time for a diagnosis, so that if the fetus is found to be abnormal, a mother can choose to end her pregnancy before she is too far along. "Sampling is a relatively simple procedure," Dr. Sarto explained. "The patient can leave about 30 minutes after the sample is taken." She warned, however, that there are physical risks involved. An infection or hemorrhage possibly could kill or abort the fetus. But of the approximately 300 amnion samples known to have been taken in this country for genetic reasons and analyzed for a risk fastor, only one or two spontaneous abortions have occurred. "This is no greater abortion rate than what would be expected in the population generally," Dr. Sarto said.

Dr. Sarto's group at University Hospitals has performed 40-50 tests for genetic risk detection. People who seek the tests usually have had a child with a genetic defect or a family member who is affected with an inherited disorder.

"Women over 40 also seek examination," said Dr. Sarto, adding that they have a greater chance of having a mongoloid child. Although women over 35 account for only 13.5 per cent of all pregnancies, over 50 per cent of all mongoloid infants came from mothers in this group.

Dr. Sarto described one of her patients. The women was 43 and had been pregnant six times. Her first son was mongoloid and is institutionalized. A second mongoloid son died in infancy. Her third and fourth pregnancies ended in spontaneous abortions and her fourth and fifth produced normal females. She was tested and her baby predicted to be normal. Delivery proved this diagnosis correct.

"More work must be done to detect a large number of inherited disorders, which cannot yet be determined by amniotic fluid studies," Dr. Sarto said. She also hopes a way will be found to shorten the time it takes to analyze the cells from the fluid.

"The ultimate goal of those involved in genetic risk detection," Dr. Sarto believes, "is that high-risk parents will seek preconceptual genetic counseling so that hopefully even the first affected offspring can be avoided."
